

|   |                    |                                   |   |                        |                              |  |                    |
|---|--------------------|-----------------------------------|---|------------------------|------------------------------|--|--------------------|
| <b>Well Construction Report</b><br><b>WISCONSIN UNIQUE WELL NUMBER</b>  |                    |                                   |   | Form 3300-077A         |                              |  |                    |
| Property Owner  |                    |                                   | Phone #   |                        |                              |  |                    |
| Mailing Address   |                    |                                   |   |                        |                              |  |                    |
| City  |                    | State                             |   | Zip Code               |                              |  |                    |
| County  |                    | Co. Permit #                      |   | Notification #         |                              |  |                    |
|   |                    |                                   |   | Completed              |                              |  |                    |
| Well Constructor (Business Name)  |                    |                                   | Lic. #  |                        | Facility ID # (Public Wells) |  |                    |
|   |                    |                                   |   |                        | Well Plan Approval #         |  |                    |
| Address   |                    |                                   |   |                        | Approval Date (mm-dd-yyyy)   |  |                    |
| Hicap Permanent Well #  |                    | Common Well #                     |   | Specific Capacity      |                              |  |                    |
| <b>3. Well serves</b> # of  |                    |                                   | Hicap Well ?<br>Hicap Property ?<br>Hicap Potable ? |                        |                              |  |                    |
| Heat Exchange ____ # of drillholes  |                    |                                   |   |                        |                              |  |                    |
| <b>4. Potential Contamination Sources - ON REVERSE SIDE</b>   |                    |                                   |   |                        |                              |  |                    |
| <b>5. Drillhole Dimensions and Construction Method</b>  |                    |                                   |   |                        |                              |  |                    |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; padding: 5px;">           Upper Enlarged Drillhole<br/><br/>           Rotary - Mud Circulation .....<br/>           Rotary - Air .....<br/>           Rotary - Air &amp; Foam .....<br/>           Drill-Through Casing Hammer<br/>           Reverse Rotary<br/>           Cable-tool Bit ____ in. dia...<br/>           Dual Rotary .....<br/>           Temp. Outer Casing ____ in. dia<br/>           Removed? ____ depth ft. (If NO explain on back side)         </td> <td style="width: 50%; padding: 5px;">           Lower Open Bedrock         </td> </tr> </table> |                    |                                   |   |                        |                              | Upper Enlarged Drillhole<br><br>Rotary - Mud Circulation .....<br>Rotary - Air .....<br>Rotary - Air & Foam .....<br>Drill-Through Casing Hammer<br>Reverse Rotary<br>Cable-tool Bit ____ in. dia...<br>Dual Rotary .....<br>Temp. Outer Casing ____ in. dia<br>Removed? ____ depth ft. (If NO explain on back side) | Lower Open Bedrock |
| Upper Enlarged Drillhole<br><br>Rotary - Mud Circulation .....<br>Rotary - Air .....<br>Rotary - Air & Foam .....<br>Drill-Through Casing Hammer<br>Reverse Rotary<br>Cable-tool Bit ____ in. dia...<br>Dual Rotary .....<br>Temp. Outer Casing ____ in. dia<br>Removed? ____ depth ft. (If NO explain on back side)  | Lower Open Bedrock |                                   |   |                        |                              |  |                    |
| <b>8. Geology</b>   |                    |                                   |   |                        |                              |  |                    |
| <b>6. Casing, Liner, Screen</b>   |                    |                                   |   |                        |                              |  |                    |
| Dia. (in.)  |                    | Screen type, material & slot size |   | From (ft.)    To (ft.) |                              |  |                    |
| <b>7. Grout or Other Sealing Material</b>   |                    |                                   |   |                        |                              |  |                    |
| Method  |                    |                                   |   |                        |                              |  |                    |
| <b>9. Static Water Level</b>  |                    |                                   |   |                        |                              |  |                    |
| ____ ft. ____ ground surface  |                    |                                   |   |                        |                              |  |                    |
| <b>10. Pump Test</b>  |                    |                                   |   |                        |                              |  |                    |
| Pumping level ____ ft. below surface<br>Pumping at ____ GP for ____ Hrs.<br>Pumping Method ?  |                    |                                   |   |                        |                              |  |                    |
| <b>11. Well Is</b>  |                    |                                   |   |                        |                              |  |                    |
| ____ in. ____ Grade<br>Developed ?<br>Disinfected ?<br>Capped ?   |                    |                                   |   |                        |                              |  |                    |
| <b>12. Notified Owner of need to fill &amp; seal ?</b>  |                    |                                   |   |                        |                              |  |                    |
| Filled & Sealed Well(s) as needed?  |                    |                                   |   |                        |                              |  |                    |
| <b>13. Constructor / Supervisory Driller</b>  |                    |                                   |   | Lic #                  |                              |  |                    |
|   |                    |                                   |   |                        |                              |  |                    |
| <b>Drill Rig Operator</b>   |                    |                                   |   | Lic or Reg #           |                              |  |                    |
|   |                    |                                   |   |                        |                              |  |                    |
|   |                    |                                   |   | Date Signed            |                              |  |                    |
|   |                    |                                   |   | Date Signed            |                              |  |                    |

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Comment:

Water Quality Text:

Water Quantity Text:

Difficulty Text:

Created On:

Created by:

Updated On:

Updated by: